Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 1 of 52

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Ennnie First name Middle name	First name Middle name
	Bring your picture identification to your meeting with the trustee.	Hicks Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0421	

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 2 of 52 Case number (if known)

Debtor 1 Lonnie B Hicks

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
1.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live		If Debtor 2 lives at a different address:			
		12701 S. Morgan Street Chicago, IL 60643				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Cook				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. 			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

Entered 05/11/16 18:03:54 Desc Main Page 3 of 52 Case 16-16065 Doc 1 Filed 05/11/16

Document Case number (if known) Debtor 1 Lonnie B Hicks

Part	2: Tell the Court About	our B	ankruptcy Ca	se			
7.	The chapter of the Bankruptcy Code you are				of each, see <i>Notice Require</i> f page 1 and check the appro	ed by 11 U.S.C. § 342(b) for Individuals Fopriate box.	Filing for Bankruptcy
	choosing to file under	■ C	hapter 7				
		□ с	hapter 11				
		□ с	hapter 12				
		□ с	hapter 13				
8.	How you will pay the fee		about how yo	u may pay. Typ attorney is subr	oically, if you are paying the f	check with the clerk's office in your loca ee yourself, you may pay with cash, cas r behalf, your attorney may pay with a cr	hier's check, or money
					tallments. If you choose this is (Official Form 103A).	option, sign and attach the Application	for Individuals to Pay
						option only if you are filing for Chapter 7	
			applies to you	ır family size ar	nd you are unable to pay the	r if your income is less than 150% of the fee in installments). If you choose this o	ption, you must fill out
			the Application	n to Have the (Chapter 7 Filing Fee Waived	(Official Form 103B) and file it with your	petition.
 Have you filed for bankruptcy within the 							
	last 8 years?	☐ Ye	es.				
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No	<u> </u>				
	cases pending or being filed by a spouse who is	□Ye					
	not filing this case with you, or by a business partner, or by an affiliate?						
			Debtor			Relationship to you	
			District		When	Case number, if know	n
			Debtor			Relationship to you	
			District	-	When	Case number, if know	n
11.	Do you rent your residence?	■ No	Go to l	ne 12.			
		☐ Ye	es. Has yo	ur landlord obta	ained an eviction judgment a	gainst you and do you want to stay in yo	ur residence?
				No. Go to line	12.		
				Yes. Fill out In bankruptcy pet		ction Judgment Against You (Form 101A) and file it with this

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54

Desc Main Document Page 4 of 52 Case number (if known) Debtor 1 Lonnie B Hicks Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D).

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

INO.	

☐ Yes.

Yes.

What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

Debtor 1 Lonnie B Hicks

Document Page 5 of 52

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 6 of 52

Deb	tor 1 Lonnie B Hicks				Case number ((if known)		
Part	6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as individual primarily for a personal, family, or household purpose."					
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily businency for a business or investi					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe	e that are not consum	er debts or business	debts		
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7.	. Go to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	■ Yes.	I am filing under Chapter 7. Do are paid that funds will be avail			ty is excluded and administrative expenses		
			☐ Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	0	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000		
19.	How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	\$1,000,001 - \$ \$10,000,001 - \$ \$50,000,001 - \$ \$100,000,001	- \$50 million - \$100 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
20.	How much do you estimate your liabilities to be?	\$ 100,	50,000 001 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$ □ \$10,000,001 - \$ □ \$50,000,001 - \$ □ \$100,000,001	- \$50 million - \$100 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
Part	7: Sign Below							
For	you	I have ex	amined this petition, and I decla	re under penalty of pe	erjury that the informa	ation provided is true and correct.		
						nder Chapter 7, 11,12, or 13 of title 11, ose to proceed under Chapter 7.		
			rney represents me and I did not nt, I have obtained and read the r			an attorney to help me fill out this		
		I request	relief in accordance with the cha	apter of title 11, United	d States Code, specif	ied in this petition.		
		bankrupt and 3571	cy case can result in fines up to			property by fraud in connection with a ars, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		Lonnie	nie B Hicks B Hicks e of Debtor 1		Signature of Debtor 2	2		
		Executed	May 11, 2016		Executed on	DD / YYYY		

Debtor 1 Lonnie B Hicks

Document Page 7 of 52

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joseph M. Olstein	Date	May 11, 2016
Signature of Attorney for Debtor		MM / DD / YYYY
la saula M. Olateka		
Joseph M. Olstein		
Printed name		
Olstein Law LLC		
Firm name		
10450 S. Western Ave.		
Chicago, IL 60643		
Number, Street, City, State & ZIP Code		
Contact phone 312-725-4132	Email address	Joseph@olsteinlaw.com
6300472		
Bar number & State		

		1700.11111	:III Paue o ul 57	
Fill in this inforr	mation to identify your	case:		
Debtor 1	Lonnie B Hicks			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number (if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	72,568.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	2,400.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	74,968.00
Par	t 2: Summarize Your Liabilities		
			abilities at you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	84,590.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	19,871.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	7,569.00
	Your total liabilities	\$	112,030.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,266.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,252.40
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other sc	hedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal	, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Case 16-16065 Document

Page 9 of 52
Case number (if known) Debtor 1 Lonnie B Hicks

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 2,272.00 \$ 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	19,871.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	19,871.00

	(Case 16-1606	5 Doc 1		05/11/16 ument	Entered 05/11/16 Page 10 of 52	6 18:03:54	Desc	Main
Fill	in this inf	ormation to identify	your case and th						
Deb	otor 1	Lonnie B Hid		e Name		Last Name			
	otor 2 use, if filing)	First Name	Middle	e Name		Last Name			
Uni	ted States	Bankruptcy Court for	the: NORTHER	N DISTI	RICT OF ILLIN	NOIS			
Cas	se number					-			Check if this is an amended filing
_		orm 106A/E	=						12/15
n ea hink nfor ansv	ch category it fits best mation. If m ver every qu	r, separately list and d Be as complete and lore space is needed, lestion.	escribe items. List accurate as possibl attach a separate si	le. If two heet to th	married people nis form. On the	n asset fits in more than one of the are filing together, both are ended to be a top of any additional pages, when or Have an Interest In	qually responsible	for supply	ing correct
	_	, ,	uitable interest in a	iny resid	ence, building,	land, or similar property?			
	No. Go to I	e is the property?							
1.1				What	is the property	/? Check all that apply			
	12701 S	. Morgan			Single-family h		Do not deduct sec	ured claims	or exemptions. Put
	Street addre	ss, if available, or other des	cription	<u>-</u> -	Duplex or mult		the amount of any	secured cla	ims on Schedule D: ecured by Property.
					Manufactured	or mobile home	Current value of	he Cı	urrent value of the
	Chicago) IL	60643-0000		Land		entire property?	po	ortion you own?
	City	State	ZIP Code		Investment pro Timeshare Other	operty		re of your	\$72,568.00 ownership interest by the entireties, or
				Who	has an interest Debtor 1 only	in the property? Check one	a life estate), if kr		by the entireties, or
	Cook				Debtor 2 only				
	County				Debtor 1 and I	•	☐ Check if this		nity property
				Other		f the debtors and another ou wish to add about this item on number:	(see instructions	5)	
					v.zillow.con				

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for

pages you have attached for Part 1. Write that number here......

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

\$72,568.00

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Page 11 of 52

Case number (if known) Document Debtor 1 **Lonnie B Hicks** 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put 2015 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Honda Creditors Who Have Claims Secured by Property. Model: Debtor 1 only Accord Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 3800 portion you own? Debtor 1 and Debtor 2 only entire property? Other information: ☐ At least one of the debtors and another Vehicle is leased. \$0.00 \$0.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here...... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Household goods and furnishings, kitchen appliances, and \$1,000.00 furniture is very old. 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... \$500.00 Television, cell phone. 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment

■ No

Official Form 106A/B

_		Case 16-16065	Doc 1	Filed 05/11/16 Document	Entered 05/11/16 18:03:54 Page 12 of 52 Case number (if known)	Desc Main
De	ebtor 1	Lonnie B Hicks			Case number (if known)	
	☐ Yes.	Describe				
	□ No Î	s bles: Everyday clothes, furs, Describe	leather coats	, designer wear, shoes	accessories	
		Clothin	g and wear	ing apparel.		\$500.00
	■ No		ume jewelry, e	engagement rings, wed	ding rings, heirloom jewelry, watches, gems, g	old, silver
	Exam _l ■ No	rm animals bles: Dogs, cats, birds, horse Describe	es			
	■ No	her personal and househo		ı did not already list, iı	ncluding any health aids you did not list	
15		the dollar value of all of yo art 3. Write that number he			ny entries for pages you have attached	\$2,000.00
Pa	rt 4: De	scribe Your Financial Assets				
Do	you ov	vn or have any legal or equ	uitable intere	est in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	oles: Money you have in you			osit box, and on hand when you file your petition	on
	Exam	its of money oles: Checking, savings, or o institutions. If you have	other financial e multiple acco	accounts; certificates on the same instructions with the same instructions.	of deposit; shares in credit unions, brokerage h titution, list each.	nouses, and other similar
	□ No ■ Yes			Institution r	ame:	
		17.1.		Checking	account with Chase Bank	\$400.00
18.		, mutual funds, or publicly oles: Bond funds, investmen			ney market accounts	
		lr	nstitution or is	suer name:		
19.	joint v	ublicly traded stock and in renture	terests in inc	corporated and unince	orporated businesses, including an interes	t in an LLC, partnership, and
	■ No □ Yes.	Give specific information al	bout them e of entity:		% of ownership:	
20.	Negot		rsonal checks	s, cashiers' checks, pro	egotiable instruments missory notes, and money orders. by signing or delivering them.	
		Give specific information ab	out them			
Off	icial Forr	m 106A/B		Schedule A/B: F	Property	page 3

Page 13 of 52

Case number (if known) Document Debtor 1 **Lonnie B Hicks** Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: Pension with Cook County Forest Preserve. Unknown 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ Yes. Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Official Form 106A/B Schedule A/B: Property page 4

Case 16-16065

Doc 1

Filed 05/11/16

Entered 05/11/16 18:03:54

Desc Main

	Case 16-16065	Doc 1	Filed 05/11/16	Entered 05/11/16 18:03:54	Desc Main
Debtor 1	Lonnie B Hicks		Document	Page 14 of 52 Case number (if known)	
☐ Yes.	. Name the insurance compa	any of each po	olicy and list its value.		
	Com	pany name:		Beneficiary:	Surrender or refund value:
If you	nterest in property that is described are the beneficiary of a livin one has died.			ed surance policy, or are currently entitled to rece	eive property because
☐ Yes.	. Give specific information				
Exam ■ No	s against third parties, who pples: Accidents, employment. Describe each claim			it or made a demand for payment to sue	
		ad claims of	overv pature, including	g counterclaims of the debtor and rights to	set off claims
■ No		eu ciaiiis oi	every nature, including	g counterclaims of the debtor and rights to	set on claims
	. Describe each claim				
35. Any fi ■ No	nancial assets you did not	already list			
	. Give specific information				
	the dollar value of all of yo Part 4. Write that number h			ny entries for pages you have attached	\$400.00
Part 5: De	escribe Any Business-Related	Property You	Own or Have an Interest I	n. List any real estate in Part 1.	
37. Do you	own or have any legal or equi	itable interest	in any business-related p	roperty?	
■ No. G	o to Part 6.				
☐ Yes.	Go to line 38.				
	escribe Any Farm- and Commo			n or Have an Interest In.	
46. Do yo	u own or have any legal or	equitable in	terest in any farm- or o	commercial fishing-related property?	
■ No	. Go to Part 7.				
☐ Ye	s. Go to line 47.				
Part 7:	Describe All Property You	Own or Have a	n Interest in That You Dic	Not List Above	
	u have other property of an apples: Season tickets, country				
■ No	Observation of the Control of				
⊔ Yes.	. Give specific information				
54. Add	the dollar value of all of yo	our entries fr	om Part 7. Write that n	umber here	\$0.00

Official Form 106A/B Schedule A/B: Property page 5

Page 15 of 52

Case number (if known) Document Debtor 1 **Lonnie B Hicks**

Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$72,568.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$2,000.00		
58.	Part 4: Total financial assets, line 36	\$400.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$2,400.00	Copy personal property total	\$2,400.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$74,968.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your	case:		
Debtor 1	Lonnie B Hicks			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				Check if this is an
				amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
12701 S. Morgan Chicago, IL 60643 Cook County	\$72,568.00		\$15,000.00	735 ILCS 5/12-901	
www.zillow.com Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit		
Household goods and furnishings, kitchen appliances, and furniture is	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)	
very old. Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit		
Television, cell phone. Line from Schedule A/B: 7.1	\$500.00		\$500.00	735 ILCS 5/12-1001(b)	
Line non Schedule A.B. 1.1			100% of fair market value, up to any applicable statutory limit		
Clothing and wearing apparel.	\$500.00		\$500.00	735 ILCS 5/12-1001(a)	
Line nom Schedule A/B. 11.1			100% of fair market value, up to any applicable statutory limit		
Pension with Cook County Forest Preserve.	Unknown		\$0.00	735 ILCS 5/12-1006	
Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		

Case 16-16065 Filed 05/11/16 Desc Main Doc 1 Entered 05/11/16 18:03:54 Page 17 of 52 Case number (if known) Document Debtor 1 Lonnie B Hicks 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

		Document	Page 18 d	of 52		
Fill in this informa	tion to identify you	ır case:				
Debtor 1	Lonnie B Hicks					
Debtor 1	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
Linitad States Bank	ruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS			
Office Glates Barik	auptoy Court for the.	NORTHERN BIOTRIOT OF TEE				
Case number						
(if known)					☐ Check	if this is an
					ameno	ded filing
000 : 15	400D					
Official Form	<u>106D</u>					
Schedule D): Creditors	Who Have Claims	Secured	by Propert	У	12/15
				<u> </u>		
		If two married people are filing togethe out, number the entries, and attach it t				
number (if known).	.	,				
1. Do any creditors ha	ave claims secured by	y your property?				
□ No. Check the property of the property o	nis box and submit th	his form to the court with your other	schedules. You	have nothing else to	o report on this form.	
■ Ves Fill in a	Il of the information	helow		-		
		DCIOW.				
Part 1: List All S	Secured Claims			Column A	Column B	Column C
		more than one secured claim, list the cred		Amount of claim	Value of collateral	Unsecured
		s a particular claim, list the other creditors in Part 2. A cal order according to the creditor's name.		Do not deduct the	that supports this	portion
	`			value of collateral.	claim	if any
	londa Finance	Describe the property that secures t	he claim:	\$12,158.00	Unknown	\$12,158.00
Creditor's Name		Lease				
2170 Point	Dlvd	As of the date you file, the claim is:	Check all that			
Elgin, IL 60		apply.				
		☐ Contingent				
Number, Street, C	ity, State & Zip Code	☐ Unliquidated				
Who owes the debt	2 Charle and	☐ Disputed Nature of lien. Check all that apply.				
_	if Check one.	_		. 1		
■ Debtor 1 only		☐ An agreement you made (such as r car loan)	nortgage or secur	ea		
☐ Debtor 2 only						
Debtor 1 and Debt		☐ Statutory lien (such as tax lien, med	chanic's lien)			
☐ At least one of the		☐ Judgment lien from a lawsuit				
☐ Check if this clair community debt		Other (including a right to offset)				
community debt						
	Opened					
	5/01/15					
Data dahta !:- a	Last Active	Last Adiates of account assemble	_{ber} 3761			
Date debt was incurr	red 1/08/16	Last 4 digits of account numb	ser 3701			
				•	.	
2.2 Americas S	ervicing Co	Describe the property that secures t		\$72,432.00	\$72,568.00	\$0.00
Creditor's Name		12701 S. Morgan Chicago, IL	_ 60643			
		Cook County www.zillow.com				
		As of the date you file, the claim is:	Check all that			
P.o. Box 10		apply.	onoon an mar			
Des Moines	<u> </u>	Contingent				
Number, Street, C	ity, State & Zip Code	Unliquidated				
Miles are de la	12 Ob I	Disputed				
Who owes the debt	r Uneck one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as r car loan)	nortgage or secur	ed		
Debtor 2 only		_				
Debtor 1 and Debt	•	Statutory lien (such as tax lien, med	chanic's lien)			
At least one of the	debtors and another	☐ Judgment lien from a lawsuit				

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 19 of 52

Debtor 1	Lonnie B	B Hicks		Case number (if know)					
	First Name	Middle N	lame	Last Name					
☐ Check if this claim relates to a community debt		☐ Other (including a right to offset)							
Date debt	was incurred	Opened 8/01/06 Last Active 1/08/16	Last 4	digits of account number	5045				
		•		is page. Write that number I e totals from all pages.	nere:		\$84,590.00		
Write the	at number her	e:					\$84,590.00		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this informa	ation to identify your	case:			. //		
Debtor 1	Lonnie B Hicks						
Dobtor 2	First Name	Middle	Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle	Name	Last Name			
United States Bank	kruptcy Court for the:	NORTHE	RN DISTRICT OF ILL	INOIS			
Case number						_	if this is an ed filing
Official Form	1065/5						-
Official Form	<u>ਾ∪ਰ⊏/</u> F: Creditors W	/ho Hav	a Unsacurad	Claime			12/15
any executory contra Schedule G: Executo Schedule D: Creditor eft. Attach the Conti name and case numb	accurate as possible. Us tots or unexpired leases ory Contracts and Unexp is Who Have Claims Sec nuation Page to this page oer (if known). of Your PRIORITY Ur	that could re pired Leases (cured by Prop ge. If you have	sult in a claim. Also li Official Form 106G). D erty. If more space is r e no information to rep	st executory contract o not include any cr seeded, copy the Pa	cts on Schedule A/B: F reditors with partially s rt you need, fill it out, i	roperty (Official For ecured claims that a number the entries in	n 106A/B) and on re listed in the boxes on the
1. Do any creditors	s have priority unsecure	ed claims aga	inst you?				
☐ No. Go to Par	rt 2.						
Yes.							
identify what type possible, list the	priority unsecured claims e of claim it is. If a claim ha claims in alphabetical orde an one creditor holds a pa	as both priority er according to	and nonpriority amount to the creditor's name. If y	s, list that claim here ou have more than t	and show both priority a	nd nonpriority amount	s. As much as
(For an explanati	on of each type of claim,	see the instruc	tions for this form in the	instruction booklet.)	Total claim	Priority	Nonpriority
2.1 Illinois D	opertment of Pove	nuo	Loot 4 digits of poopur	ıt numbar	\$0.00	amount	amount
Priority Cred			Last 4 digits of accour			\$0.00	\$0.00
PO Box 5 Chicago.	54338 IL 60664-0338		When was the debt inc	curred?			
Number Stre	eet City State ZIp Code		As of the date you file,	the claim is: Check	all that apply		
Who incurred	the debt? Check one.		☐ Contingent				
■ Debtor 1 on	ly		☐ Unliquidated				
Debtor 2 on	ly		☐ Disputed				
Debtor 1 and	d Debtor 2 only		Type of PRIORITY uns				
☐ At least one	of the debtors and another	er	☐ Domestic support ob	ligations			
☐ Check if thi	is claim is for a commu	nity debt	Taxes and certain ot	her debts you owe th	e government		
	bject to offset?		☐ Claims for death or p	ersonal injury while y	ou were intoxicated		
■ No			Other. Specify				
☐ Yes							
2.2 Internal F	Revenue Service		Last 4 digits of accour	t number	\$19,871.00	\$0.00	\$19,871.00
PO Box 7			When was the debt inc	urred?			
Philadelp Number Stre	ohia, PA 19101-734 eet City State Zlp Code		As of the date you file,	the claim is: Check	all that apply		
	the debt? Check one.		☐ Contingent	are claim to. Oncon	ан ини арргу		
Debtor 1 on	ly		☐ Unliquidated				
Debtor 2 on			☐ Disputed				
Debtor 1 and	-		Type of PRIORITY uns	ecured claim:			
	of the debtors and anothe		☐ Domestic support ob				
		01	Taxes and certain ot	_	o government		
Is the claim su	is claim is for a commu bject to offset?	-	☐ Claims for death or p	ersonal injury while y	ou were intoxicated		
■ No □ Yes			Other. Specify				
LIYES							

Page 21 of 52 Case number (if know) Document Debtor 1 Lonnie B Hicks

Pa	rt 2: List All of Your NONPRIORITY Unsecu	red Claims								
3.	o any creditors have nonpriority unsecured claims against you?									
	☐ No. You have nothing to report in this part. Submit t	his form to the court with your other sch	edules.							
	Yes.									
4.	List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each clathan one creditor holds a particular claim, list the other Part 2.	aim. For each claim listed, identify what	type of claim it is. Do not list claims already in	cluded in Part 1. If more Continuation Page of						
				Total claim						
4.1		Last 4 digits of account number	3715	\$1,602.00						
	Nonpriority Creditor's Name		Opened 1/01/07 Last Active							
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	7/21/14	_						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply							
	■ Debtor 1 only	☐ Contingent								
	Debtor 2 only	□ Unliquidated								
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:								
	☐ At least one of the debtors and another									
	☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims								
	debt Is the claim subject to offset?									
	No	Debts to pension or profit-sharing	ng plans, and other similar debts							
	Yes	Other. Specify Credit Card	I	_						
4.2	Credit Cntrl	Last 4 digits of account number	6079	\$400.00						
	Nonpriority Creditor's Name 5757 Phantom Dr.	When was the debt incurred?		_						
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply							
	Who incurred the debt? Check one.									
	■ Debtor 1 only	☐ Contingent								
	☐ Debtor 2 only	☐ Unliquidated ☐ Disputed								
	☐ Debtor 1 and Debtor 2 only									
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	u ciaim.							
	☐ Check if this claim is for a community debt	_ *****								
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims								
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts							
	Yes	■ Other. Specify Med1 02 M	etrosouth Medical Center	_						

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 22 of 52
Case number (if know)

Debtor 1 Lonnie B Hicks 4.3 \$225.00 **Credit Cntrl** Last 4 digits of account number 3665 Nonpriority Creditor's Name 5757 Phantom Dr. When was the debt incurred? Hazelwood, MO 63042 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Med1 02 Metrosouth Medical Center ☐ Yes 4.4 **Credit Cntrl** Last 4 digits of account number 5082 \$110.00 Nonpriority Creditor's Name 5757 Phantom Dr. When was the debt incurred? Hazelwood, MO 63042 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Med1 02 Metrosouth Medical Center** 4.5 **Credit Cntrl** Last 4 digits of account number \$65.00 5787 Nonpriority Creditor's Name 5757 Phantom Dr. When was the debt incurred? Hazelwood, MO 63042 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Med1 02 Metrosouth Medical Center

Page 23 of 52 Case number (if know) Document Debtor 1 Lonnie B Hicks 4.6 \$65.00 **Credit Cntrl** Last 4 digits of account number 6110 Nonpriority Creditor's Name 5757 Phantom Dr. When was the debt incurred? Hazelwood, MO 63042 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Med1 02 Metrosouth Medical Center ☐ Yes 4.7 **Credit Cntrl** Last 4 digits of account number 6080 \$65.00 Nonpriority Creditor's Name 5757 Phantom Dr. When was the debt incurred? Hazelwood, MO 63042 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Med1 02 Metrosouth Medical Center 4.8 **Credit Cntrl** Last 4 digits of account number 8538 \$65.00 Nonpriority Creditor's Name 5757 Phantom Dr. When was the debt incurred? Hazelwood, MO 63042 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

■ No ☐ Yes report as priority claims

Other. Specify

 \square Obligations arising out of a separation agreement or divorce that you did not

Med1 02 Metrosouth Medical Center

Debts to pension or profit-sharing plans, and other similar debts

Is the claim subject to offset?

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 24 of 52

Case number (if know)

Debtor 1 Lonnie B Hicks 4.9 \$60.00 **Credit Cntrl** Last 4 digits of account number 7964 Nonpriority Creditor's Name 5757 Phantom Dr. When was the debt incurred? Hazelwood, MO 63042 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Med1 02 Metrosouth Medical Center ☐ Yes 4.1 Credit Cntrl 8041 \$50.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5757 Phantom Dr. Hazelwood, MO 63042 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Med1 02 Metrosouth Medical Center ☐ Yes 4.1 **Credit Coll** 5348 \$138.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 725 Canton St Norwood, MA 02062 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify 10 At T

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 25 of 52

Debt	Dr 1 Lonnie B Hicks		Case number (if know)						
4.1 2	Credit Management Lp	Last 4 digits of account number	2685	\$129.00					
	Nonpriority Creditor's Name 4200 International Pkwy Carrollton, TX 75007	When was the debt incurred?	Opened 9/01/12						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not						
	No	Debts to pension or profit-sharing	g plans, and other similar debts						
	☐ Yes	Other. Specify Collection	Attorney Wow Chicago						
4.1	Drleonards	Last 4 digits of account number	0A4A	\$47.00					
	Nonpriority Creditor's Name	_							
	1515 S 21st St Clinton, IA 52732	When was the debt incurred?	Opened 5/08/14 Last Active 8/04/14						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:							
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims							
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts						
	Yes	Other. Specify Charge Acc	count						
4.1 4	Hccredit/feb	Last 4 digits of account number	0360	\$984.00					
	203 E Emma Ave Ste A Springdale, AR 72764	When was the debt incurred?	Opened 5/01/08 Last Active 6/01/12						
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply						
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another		Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not						
	No	Debts to pension or profit-sharing							
	Yes	■ Other. Specify Credit Card	I						

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 26 of 52

Case number (if know) Debtor 1 Lonnie B Hicks 4.1 \$138.00 I C System 5001 Last 4 digits of account number 5 Nonpriority Creditor's Name Po Box 64378 When was the debt incurred? Saint Paul, MN 55164 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 11 Att Midwest ☐ Yes 4.1 **Peoples Engy** 7279 Unknown Last 4 digits of account number 6 Nonpriority Creditor's Name Opened 1/30/04 Last Active 200 East Randolph When was the debt incurred? 9/23/13 Chicago, IL 60601 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Agriculture Other. Specify 4.1 **Perfection Collection** 5910 \$1.150.00 Last 4 digits of account number Nonpriority Creditor's Name 313 E 1200 S When was the debt incurred? Opened 9/01/15 Orem, UT 84058 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection Attorney Vivint ☐ Yes

Debtor	1 Lonnie B	Hicks	Document Page	27 of	f 52 se number (i	if know)					
4.1	Rgs Financ	ial	Last 4 digits of account numb	er 87	92		\$304.00				
8	Nonpriority Cree	ditor's Name II Dr Ste 200	When was the debt incurred?		pened 10/0		φσσ				
,	Richardson	n, TX 75081 City State Zlp Code	_ As of the date you file, the clai	m is: Ch	neck all that a	nnly					
		the debt? Check one.	no or the date you me, the old		iook all triat a	PPI					
	Debtor 1 on	ily	☐ Contingent								
	Debtor 2 on	ıly	☐ Unliquidated								
	Debtor 1 an	d Debtor 2 only	☐ Disputed								
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecu	ıred clai	m:						
		is claim is for a community	☐ Student loans								
	debt	ubject to offset?	Obligations arising out of a sereport as priority claims	eparation	agreement of	or divorce that you did not					
	No	ibject to onset:	Debts to pension or profit-sha	aring plai	ns. and other	similar debts					
	□ Yes		■ Other Specify Collectio	٠.							
			- Other. Specify								
4.1 9	Syncb/care		Last 4 digits of account number	er 53	61		\$1,972.00				
	Nonpriority Cre	ditor's Name	_		anad 1/0						
	950 Forrer Kettering, C		When was the debt incurred?		20/12	1/09 Last Active					
		City State Zlp Code the debt? Check one.	As of the date you file, the clai	m is: Ch	neck all that a	pply					
	Debtor 1 on	ıly	☐ Contingent								
	Debtor 2 on	ıly	☐ Unliquidated								
	Debtor 1 an	d Debtor 2 only	☐ Disputed								
	☐ At least one	e of the debtors and another		Type of NONPRIORITY unsecured claim:							
		is claim is for a community	☐ Student loans								
	debt	ubject to offset?	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 								
	No	ibject to onset?									
	☐ Yes		■ Other. Specify Charge A			cirrilar dobio					
	⊔ Yes		Other. Specify	Accour	11.						
Part 3:	List Other	s to Be Notified About a Deb	t That You Already Listed								
			oout your bankruptcy, for a debt that	at vou al	ready listed	in Parts 1 or 2. For examp	e. if a collection agency				
is tryii have r	ng to collect fro more than one o	om you for a debt you owe to sor	neone else, list the original credito you listed in Parts 1 or 2, list the a	r in Part	s 1 or 2, ther	n list the collection agency	here. Similarly, if you				
Part 4:	Add the A	mounts for Each Type of Un	secured Claim								
	the amounts of of unsecured cla		ns. This information is for statistica	al report	ing purpose	s only. 28 U.S.C. §159. Add	the amounts for each				
						Total Claim					
,	6a. Total	Domestic support obligations		6a.	. \$	0.00					
cla	aims										
from P	art 1 6b. 6c.		•	6b. 6c.	· · · —	19,871.00					
	6d.		njury while you were intoxicated ecured claims. Write that amount here		· · ·	0.00					
		, ,			_ *	0.00	\neg				
	6e.	Total Priority. Add lines 6a thro	ugh 6d.	6e.	. \$	19,871.00					
						Total Claim					
	6f.	Student loans		6f.	\$	0.00					

claims from Part 2

Official Form 106 E/F

Total

Schedule E/F: Creditors Who Have Unsecured Claims

6g.

Obligations arising out of a separation agreement or divorce that

you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

6g.

6h.

0.00

Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Case 16-16065 Page 28 of 52 Case number (if know) Document

Debtor 1 Lonnie B Hicks

			 0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 7,569.00
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 7,569.00

Official Form 106 E/F

		12000		
Fill in this infor	mation to identify your	case:		
Debtor 1	Lonnie B Hicks			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.4	•				
	Name				_
	Number	Street			-
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

		Docume	ent Page 30 d	ひょうと	
Fill in this	information to identify your				
Debtor 1	Lonnie B Hicks				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
United Stat	es Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
	, ,				
Case numb (if known)	per				☐ Check if this is an
					amended filing
Official	Form 106H				
	ule H: Your Cod	obtors			40/45
Scried	ule n. Toul Cou	enroi 2			12/15
our name	and case number (if known) you have any codebtors? (if	. Answer every question			p of any Additional Pages, write
■ No					
■ No □ Yes					
Arizona No.	nin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. . Did your spouse, former spo	, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		ty states and territories include)
in line Form 1 out Co	2 again as a codebtor only i 106D), Schedule E/F (Officia Ilumn 2.	f that person is a guaran	tor or cosigner. Make	sure you have listed t 06G). Use Schedule D	ng with you. List the person shown the creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Jame, Number, Street, City, State and Z	IP Code		Column 2: The cr Check all schedul	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street			<u> </u>	
	City	State	ZIP Code		
3.2				☐ Schedule D, lir	
	Name			□ Schedule E/F,	·
				☐ Schedule G, lir	
1	Number Street			_	
C	City	State	ZIP Code		

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 31 of 52

						_				
Fill	in this information to identify your c	ase:								
De	btor 1 Lonnie B Hi	cks			_					
1 -	btor 2 ouse, if filing)				_					
Un	ited States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS		_					
Ca	se number		_			Chec	k if this is	:		
(If k	nown)						n amende	•		
									g postpetition llowing date:	
0	fficial Form 106I					N	1M / DD/ \	YYY		
S	chedule I: Your Inc	ome								12/1
spo atta	plying correct information. If you use. If you are separated and you ach a separate sheet to this form. The describe Employment	ır spouse is not filing wi	ith you, do not inclu	ıde inforn	nati	on abou	your spe	ouse. If mo	re space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fil	ing spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed	■ Employed			☐ Employed —			
	information about additional employers.		☐ Not employed		□ No			mployed		
	employers.	Occupation	Retired							
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed the	here?				_			
Pa	rt 2: Give Details About Mor	nthly Income								
	imate monthly income as of the duse unless you are separated.	ate you file this form. If y	you have nothing to r	eport for a	any	line, write	e \$0 in the	space. Inc	lude your no	n-filing
	ou or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	on for all e	mpl	oyers for	that perso	on the lir	nes below. If	you need
						For Del	otor 1		otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,	•		2.	\$		0.00	\$	N/A	-
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	<u>-</u>
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	N/A	

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 32 of 52

Deb	tor 1	Lonnie B Hicks	-	(Case	number (if kr	nown)				
					For	Debtor 1			Debtor n-filing s		
	Cop	y line 4 here	4.		\$_	C	0.00	\$		N/A	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	C	0.00	\$		N/A	١
	5b.	Mandatory contributions for retirement plans	5b	١.	\$	C	0.00	\$		N/A	\
	5c.	Voluntary contributions for retirement plans	5c.		\$	C	0.00	\$		N/A	<u> </u>
	5d.	Required repayments of retirement fund loans	5d	l.	\$	C	0.00	\$		N/A	<u>\</u>
	5e.	Insurance	5e		\$_		0.00	\$		N/A	
	5f.	Domestic support obligations	5f.		\$_		0.00	\$_		N/A	
	5g.	Union dues	5g		\$_		0.00	\$_		N/A	_
	5h.	Other deductions. Specify:	5h	1.+	\$_		0.00	+ \$_		N/A	<u>\</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	C	0.00	\$_		N/A	<u>\</u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	C	0.00	\$_		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	١.	\$	C	0.00	\$		N/A	
	8b.	Interest and dividends	8b		<u> </u>		0.00	\$_		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		\$_	C	0.00	\$		N/A	<u> </u>
	8d.	Unemployment compensation	8d	l.	\$	C	0.00	\$		N/A	<u>\</u>
	8e.	Social Security	8e	٠.	\$	586	00.6	\$		N/A	\
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f. 8g		\$_ \$	1,680	0.00	\$_ \$		N/A	
	8h.	Other monthly income. Specify:	8h		\$ -			+ \$ ⁻		N/A	
	011.			···	Ψ_			`		14/	<u>`</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$		2,266	6.00	\$_		N/	Α
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		2,266.00	+ \$		N/A	= \$	2,266.00
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		*-		2,200.00	- -		14//		2,200.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe			. •				e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	2,266.00
13	Do	you expect an increase or decrease within the year after you file this form	?							Comb month	ined Ily income
١٥.	₽	No.	•								
	_	Yes Explain:									

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 33 of 52

Fill in #	nis informat	ion to identify yo	our case:			1		
Debtor 1		Lonnie B Hid				Che	eck if this is:	
		LOIIIIE B FII	~NO				An amended filing	
Debtor 2 (Spouse	2 e, if filing)						A supplement show 13 expenses as of	wing postpetition chapter the following date:
United S	States Bankrı	intev Court for the	· NORTH	HERN DISTRICT OF ILLIN	OIS		MM / DD / YYYY	
		apicy Court for the	. NOITH	IERRO DIOTRIOT OF IEER			WIWI / DD / TTTT	
(If know								
Offic	cial Fo	rm 106J				-		
Sch	edule	J: Your	Exper	ises				12/1
inform	ation. If mo	ind accurate as ore space is ne n). Answer eve	eded, atta	. If two married people ar ich another sheet to this n.	e filing together, b form. On the top of	oth are equal of any addit	ually responsible fo ional pages, write y	or supplying correct your name and case
Part 1:		be Your House	ehold					
	this a join							
	No. Go to		in a senar	ate household?				
	. 100. D00 .		ш а осран	ate nousenoid.				
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of De	btor 2.	
2. D o	o you have	dependents?	■ No					
	o not list De ebtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
Do	o not state t	the						□ No
de	ependents r	names.						☐ Yes
								□ No □ Yes
								□ No
								☐ Yes
								□ No
								☐ Yes
		enses include people other t	han	No				
yc	ourself and	your depende	nts? ⊔	Yes				
expens	ate your ex ses as of a		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
applica	able date.							
the val		assistance an		government assistance in cluded it on <i>Schedule I:</i> Y			Your exp	enses
		r nome owners d any rent for th		ses for your residence. In or lot.	nclude first mortgag	e 4.	\$	612.00
If	not include	ed in line 4:						
4a		state taxes				4a.	·	0.00
4b		ty, homeowner's				4b.	·	0.00
4c 4c		maintenance, re owner's associa		upkeep expenses		4c. 4d.	·	0.00
				oominium dues our residence, such as ho	me equity loans	4a. 5.		0.00

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 34 of 52

Deb	otor 1	Lonnie E	3 Hicks	Case nu	mk	per (if known)	
6.	Utiliti	ies:					
٥.	6a.		, heat, natural gas	6a	a.	\$	270.00
	6b.		wer, garbage collection	6b	٥.	\$	50.00
	6c.		e, cell phone, Internet, satellite, and cable services	60	Э.	\$	140.00
	6d.	Other. Spe	ecify:	60	d.	\$	0.00
7.	Food	and hous	ekeeping supplies		7.	\$	300.00
8.			children's education costs	8	3.	\$	0.00
9.	Cloth	ning, laund	ry, and dry cleaning	ę	9.	\$	40.00
10.	Perso	onal care p	products and services	10).	\$	50.00
			ntal expenses	11	١.	\$	100.00
			Include gas, maintenance, bus or train fare.			· ——	
			ar payments.	12		*	120.00
13.	Enter	rtainment,	clubs, recreation, newspapers, magazines, and l	books 13	3.	\$	0.00
14.	Chari	itable cont	ributions and religious donations	14	1.	\$	0.00
15.	Insur	rance.					
			nsurance deducted from your pay or included in lines				
	15a.	Life insura	ance	15a		*	0.00
	15b.	Health ins	urance	15b).	\$	0.00
	15c.	Vehicle in:	surance	150	Э.	\$	119.00
	15d.	Other insu	rance. Specify:	150	d.	\$	0.00
16.			clude taxes deducted from your pay or included in li	nes 4 or 20.			
	Speci	,		16	3.	\$	0.00
17.			ease payments:				
			ents for Vehicle 1	17a			451.40
			ents for Vehicle 2	17b			0.00
		Other. Spe		170	Э.	\$	0.00
		Other. Spe	·	17d	d.	\$	0.00
18.			of alimony, maintenance, and support that you of		,	c	0.00
40			your pay on line 5, Schedule I, Your Income (Offi	olai i olili 1001).	ο.	Φ	
19.			s you make to support others who do not live wi	•		Ф	0.00
20	Speci	· —	erty expenses not included in lines 4 or 5 of this	form or on Schodule II.		ur Incomo	
20.			s on other property	20a			0.00
		Real estat		20b			0.00
			homeowner's, or renter's insurance	200		·	0.00
			nce, repair, and upkeep expenses	200			0.00
			er's association or condominium dues	200			
24			ers association of condominatin dues			·	0.00
21.	Otne	r: Specify:			۱.	+\$	0.00
22.	Calcu	ulate your	monthly expenses				
			through 21.			\$	2,252.40
	22b. (Copy line 2	2 (monthly expenses for Debtor 2), if any, from Office	ial Form 106J-2		\$,
			a and 22b. The result is your monthly expenses.			\$	2,252.40
	220.7	7 taa 11110 22	a and 225. The result to your menting expenses.			<u> </u>	2,232.40
23.		-	monthly net income.				
	23a.	Copy line	12 (your combined monthly income) from Schedule				2,266.00
	23b.	Copy your	monthly expenses from line 22c above.	23b).	-\$	2,252.40
					ſ		
	23c.		our monthly expenses from your monthly income.	00.		c	13.60
		The result	is your monthly net income.	230	.ز	\$	13.00
24	De	011 0V=004	on increase or degrees in very expense within	the year often year file th		form?	
∠4.			an increase or decrease in your expenses within ou expect to finish paying for your car loan within the year o				rease or decrease because of a
			terms of your mortgage?	as you expect your mortgage	~ P	aymont to mo	3, 400,0400 bookuse of a
	■ No						
	Пу		Explain here:				

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 35 of 52

Fill in this inform	nation to identify your	case:			
Debtor 1	Lonnie B Hicks First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					Charle if this is an
(II KHOWH)					Check if this is an amended filing
If two married pe You must file this obtaining money	eople are filing togethers form whenever you fi	r, both are equally respo le bankruptcy schedules n connection with a bank			
Sign	n Below				
Did you pay	y or agree to pay some	one who is NOT an attor	ney to help you fill out ba	nkruptcy forms?	
■ No					
☐ Yes. N	Name of person				etition Preparer's Notice, nature (Official Form 119)
•	Ity of perjury, I declare e true and correct.	that I have read the sum	mary and schedules filed	with this declaration and	

X /s/ Lonnie B Hicks

Lonnie B Hicks Signature of Debtor 1

Date May 11, 2016

Signature of Debtor 2

Date

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 36 of 52

Fill	in this inform	nation to identify you	r case:			
	otor 1	Lonnie B Hicks				
D0.	7.01	First Name	Middle Name	Last Name		
l	otor 2 ouse if, filing)	First Name	Middle Name	Last Name		
	-	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS		
	se number				-	Check if this is an mended filing
Sta	s complete a	of Financial		are filing together, both are	equally responsible for sup	
		ore space is needed, a). Answer every que		this form. On the top of an	/ additional pages, write you	ır name and case
Par	t 1: Give D	etails About Your Ma	arital Status and Where You	Lived Before		
1.	What is your	current marital statu	ıs?			
	□ Married■ Not mar	ried				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>ı</i> .	
	Debtor 1 Pri	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. state					ity property state or territory co, Texas, Washington and W	
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Par	t 2 Explain	n the Sources of You	r Income			
4.	Fill in the tota	I amount of income yo	nployment or from operating ureceived from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$10,000.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document

Page 37 of 52
Case number (if known) Debtor 1 Lonnie B Hicks

					Debtor 1				Debtor 2		
						of income that apply.		income e deductions and ions)	Sources of inc		Gross income (before deductions and exclusions)
			■ Wagesbonuses,	s, commissions, tips		\$24,000.00	☐ Wages, combonuses, tips	nmissions,			
					☐ Opera	iting a business			☐ Operating a	business	
5.	Include and oth winning	inco er p js. If	ome regard ublic bene you are fil	dless of wheth fit payments; ing a joint cas	ner that inco pensions; r se and you	ome is taxable. Ex- rental income; inter have income that y	amples of rest; divid you receiv	ends; money colle red together, list it	alimony; child supp	royalties; and ebtor 1.	ecurity, unemployment, d gambling and lottery
	LIST GAC)II 3C	dice and i	ine gross inco	onie nom ea	acii source separa	itely. Do n	of include income	that you listed in iii	16 4.	
	■ No		ill in the de	etails.							
					Debtor 1				Debtor 2		
						of income below.	each s	income from source e deductions and ions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3:	_ist (Certain Pa	vments You	Made Befo	ore You Filed for	Bankrup	tcv			
				,							
6.	Are eitl □ No	٥.	Neither D	ebtor 1 nor D	ebtor 2 ha	rimarily consume as primarily consu family, or househo	umer deb		ts are defined in 11	U.S.C. § 10 ⁻	1(8) as "incurred by an
			□ No. □ Yes	Go to line 7 List below e paid that cr not include	each creditor editor. Do r payments t	or to whom you par not include paymen to an attorney for t	id a total onts for dor	of \$6,425* or more mestic support obli uptcy case.		ments and thild support a	ne total amount you nd alimony. Also, do
	■ Ye		Debtor 1 d	or Debtor 2 o	or both hav	e primarily consu	umer deb	ts.	al of \$600 or more?		
			_	oo dayo bole	no you moo	rioi barikraptoy, ai	ia you pay	arry oreaster a too	ar or wood or more.		
			No.	Go to line 7							
			⊔ _{Yes}		ments for c	lomestic support o			d the total amount oport and alimony.		creditor. Do not nclude payments to an
	Credit	or's	Name and	d Address		Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	ayment for
7.	Insiders of which	s inc h you ess	lude your r u are an of	elatives; any ficer, director	general pa , person in	rtners; relatives of control, or owner of	any gene of 20% or	ral partners; partners more of their votin	,	u are a gene ny managing	ral partner; corporations agent, including one for
	■ No		ist all navn	nents to an in	sider						
			lame and		Sider.	Dates of payme	ent	Total amount paid	Amount you still owe	Reason fo	r this payment

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 38 of 52 Case number (if known)

8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos No		ments or transfer an	ny property on a	ccount of a de	ebt that benefited an
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment itor's name
Par	t 4: Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.					
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	Capital One v. Lonnie Hicks 2016 M1 10629	Contract	Circuit Court of County 50 W. Washingto Chicago, IL 6060	on	☐ Pending☐ On appe☐ Conclude	
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details below ■ No. Go to line 11. □ Yes. Fill in the information below. Creditor Name and Address		erty repossessed, to	Date	sned, attached	Value of the
		Explain what happened	d			property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bed No Yes. Fill in the details.		luding a bank or fina	ancial institutior	n, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	e creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a		erty in the possessio	on of an assigne	e for the bene	fit of creditors, a
	No					
	☐ Yes					
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup ■ No □ Yes. Fill in the details for each gift.	otcy, did you give any gift	s with a total value o	of more than \$60	00 per person?	•
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date: the g	s you gave lifts	Value
	Person to Whom You Gave the Gift and Address:					

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 39 of 52 Case number (if known)

	2011110 2 1110110			,	· /	
14.	Within 2 years before you filed for bank ■ No			with a tota	value of more than	\$600 to any charity
	Yes. Fill in the details for each gift or					
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo		Describe what you contributed		Dates you contributed	Value
Pa	rt 6: List Certain Losses					
15.	Within 1 year before you filed for bankru or gambling?	uptcy or	since you filed for bankruptcy, did you	ı lose anyt	ning because of the	ft, fire, other disaste
	■ No					
	Yes. Fill in the details.					
	Describe the property you lost and	Descri	ibe any insurance coverage for the loss	2	Date of your	Value of property
	how the loss occurred	Include	e the amount that insurance has paid. List nce claims on line 33 of Schedule A/B: Pr	pending	loss	los
Po	t 7. List Cartain Boymonts or Transfer		ice cialitis off lifte 33 of <i>Schedule A/D.</i> 1 h	operty.		
Га	t 7: List Certain Payments or Transfer	3				
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition No	prepari	ng a bankruptcy petition?			nty to anyone you
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any propert transferred	ŧу	Date payment or transfer was made	Amount o paymen
	Olstein Law LLC 10450 S. Western Ave. Chicago, IL 60643 Joseph@olsteinlaw.com		Attorney Fees		4/21/2016	\$850.00
17.	promised to help you deal with your cree Do not include any payment or transfer that No	ditors o	r to make payments to your creditors?		r transfer any prope	erty to anyone who
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any propert transferred	ty	Date payment or transfer was made	Amount o paymen
18.	transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have al	ur busir s made	ness or financial affairs? as security (such as the granting of a secu			
	Yes. Fill in the details.					
	Person Who Received Transfer		Description and value of	Describe a	any property or	Date transfer was

Address

Person's relationship to you

property transferred

made

payments received or debts

paid in exchange

Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Case 16-16065 Doc 1 Page 40 of 52
Case number (if known) Document

Debtor 1 **Lonnie B Hicks**

19.	within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prot		ny property to a	self-settle	ed trust or similar device	of which you a	re a	
	Yes. Fill in the details.							
	Name of trust	Description and	value of the pro	perty trans	sferred	Date Transfe made	r was	
Pai	t 8: List of Certain Financial Accounts, Inst	truments, Safe Deposi	t Boxes, and St	orage Uni	ts			
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or	•			•	,		
	houses, pension funds, cooperatives, associ No Yes. Fill in the details.	iations, and other fina	ncial institution	is.				
	Name of Financial Institution and	Last 4 digits of account number	Type of acco	unt or	Date account was closed, sold, moved, or transferred	Last ba before clos tra		
21.	Do you now have, or did you have within 1 yo cash, or other valuables?	ear before you filed fo	r bankruptcy, a	ny safe de	posit box or other depos	tory for securi	ties,	
	■ No □ Yes. Fill in the details.							
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		Describe	the contents	Do you stil have it?	11	
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?							
	■ No □ Yes. Fill in the details.							
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you stil have it?	il	
Pai	t 9: Identify Property You Hold or Control f	or Someone Else						
23.	Do you hold or control any property that som for someone.	neone else owns? Incl	ude any proper	ty you bor	rowed from, are storing f	or, or hold in t	rust	
	■ No □ Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the pro (Number, Street, City, Code)		Describe	the property		Value	
Pai	t 10: Give Details About Environmental Info	rmation						
For	the purpose of Part 10, the following definitio	ns apply:						
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surfac	e water, ground				us or	
	Site means any location, facility, or property to own, operate, or utilize it, including dispos		environmental	law, wheth	er you now own, operate	, or utilize it or	used	
	Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.							

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Page 41 of 52 Case number (if known) Document

Debtor 1 Lonnie B Hicks

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?							
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
25.	Have you notified any governmental unit of a	ny release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or admi	nistrative proceeding under any enviro	onmental law? Include settlements	and orders.				
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case				
Par	11: Give Details About Your Business or Co	onnections to Any Business						
27.	Within 4 years before you filed for bankruptcy	y, did you own a business or have any	of the following connections to any	y business?				
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability compar	ny (LLC) or limited liability partnership	(LLP)					
	☐ A partner in a partnership							
	☐ An officer, director, or managing exec	cutive of a corporation						
	☐ An owner of at least 5% of the voting or equity securities of a corporation							
	■ No. None of the above applies. Go to Pa	rt 12.						
	Yes. Check all that apply above and fill in	the details below for each business.						
		Describe the nature of the business	Employer Identification numbe					
	Address (Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do not include Social Security number or ITIN. Dates business existed					
28.	Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
	■ No □ Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)							

Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Case 16-16065 Page 42 of 52
Case number (if known) Document

Debtor 1 Lonnie B Hicks

Part 12: Sign Be	low		
are true and correct with a bankruptcy	t. I understand that n	ent of Financial Affairs and any attachments, and I declare unaking a false statement, concealing property, or obtaining es up to \$250,000, or imprisonment for up to 20 years, or bo	money or property by fraud in connection
/s/ Lonnie B Hic	ks		
Lonnie B Hicks		Signature of Debtor 2	
Signature of Debt	or 1		
Date May 11, 2	016	Date	
Did you attach add	itional pages to Your	Statement of Financial Affairs for Individuals Filing for Ban	nkruptcy (Official Form 107)?
■ No			
☐ Yes			
Did you pay or agr	ee to pay someone w	ho is not an attorney to help you fill out bankruptcy forms?	
■ No			

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

connection

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 43 of 52

Fill in this infor	mation to identify your	case:		
Debtor 1	Lonnie B Hicks			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
(Opouse II, IIIIIIg)	i iist ivaine	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				☐ Check if this is an
(ii kilowii)				amended filing
Official Fo Stateme i		n for Individu	uals Filing Under Chapt	ter 7 12/15
	ividual filing under cha e claims secured by yo	pter 7, you must fill out t ur property, or	this form if:	
_	• •	and the lease has not exp	oired.	
You must file thi	is form with the court wever is earlier, unless th	rithin 30 days after you f	ile your bankruptcy petition or by the date e for cause. You must also send copies to t	
If two married n	aonla ara filing togotho	r in a joint case, both are	a agually responsible for supplying correct	information Both dobtors must

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 44 of 52

Debtor 1	Lonnie B Hicks	Case number (if known)		
name: Description of property securing debt:		 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes	
For any ur in the info	rmation below. Do not list real esta	perty Leases nat you listed in Schedule G: Executory Contracts and Unexpire ate leases. Unexpired leases are leases that are still in effect; the perty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	e lease period has not yet ended.	
Describe	your unexpired personal property	leases	Will the lease be assumed?	
Lessor's n Descriptio Property:	name: n of leased		□ No □ Yes	
Lessor's n Descriptio Property:	name: on of leased		□ No □ Yes	
Lessor's n Descriptio Property:	name: on of leased		□ No □ Yes	
Lessor's n Descriptio Property:	name: on of leased		□ No □ Yes	
Lessor's n Descriptio Property:	name: on of leased		□ No □ Yes	
Lessor's n Descriptio Property:	name: n of leased		□ No □ Yes	
Lessor's n Descriptio Property:	name: on of leased		□ No □ Yes	
Under pen	Sign Below nalty of perjury, I declare that I have hat is subject to an unexpired lease	e indicated my intention about any property of my estate that see	cures a debt and any personal	
X /s/ L	onnie B Hicks	X		
Lon	nie B Hicks ature of Debtor 1	Signature of Debtor 2		
Date	May 11, 2016	Date		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-16065 Doc 1 Filed 05/11/16 Entered 05/11/16 18:03:54 Desc Main Document Page 49 of 52

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In re	Lonnie B Hicks		Case No.			
		Debtor(s)	Chapter	7		
	DISCLOSURE OF COMPENS	SATION OF ATTOR	NEY FOR DE	CBTOR(S)		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy, or	r agreed to be paid	to me, for services rendered or to		
	For legal services, I have agreed to accept			850.00		
	Prior to the filing of this statement I have received		\$	850.00		
	Balance Due		. \$	0.00		
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.					
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.					
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
	 a. Analysis of the debtor's financial situation, and rendering. b. Preparation and filing of any petition, schedules, statement. c. Representation of the debtor at the meeting of creditors. d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications. 522(f)(2)(A) for avoidance of liens on house. 	nent of affairs and plan which me and confirmation hearing, and duce to market value; exems as needed; preparation a	nay be required; any adjourned hear nption planning;	rings thereof;		
6.	By agreement with the debtor(s), the above-disclosed fee dependent of the debtors in any disclosure any other adversary proceeding.	loes not include the following son hargeability actions, judicions.	ervice: al lien avoidance	es, relief from stay actions or		
		CERTIFICATION				
	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	agreement or arrangement for pa	ayment to me for re	epresentation of the debtor(s) in		
	May 11, 2016	/s/ Joseph M. Olste	in			
I	Date	Joseph M. Olstein Signature of Attorney				
		Olstein Law LLC				
		10450 S. Western A	lve.			
		Chicago, IL 60643 312-725-4132 Fax:				
		Joseph@olsteinlav Name of law firm	v.com			
		wame oj taw jirm				

United States Bankruptcy Court Northern District of Illinois

In re	Lonnie B Hicks		Case No.		
		Debtor(s)	Chapter 7		
	VE	ERIFICATION OF CREDITOR N	MATRIX		
		Number of Creditors: 15			
	The above-named Debtor(s) (our) knowledge.) hereby verifies that the list of credi	itors is true and correct to	the best of my	
Datas	May 11, 2016	/s/ Lonnie B Hicks			

American Honda Finance 2170 Point Blvd Elgin, IL 60123

Americas Servicing Co P.o. Box 10328 Des Moines, IA 50306

Capital One Bank Usa N 15000 Capital One Dr Richmond, VA 23238

Credit Cntrl 5757 Phantom Dr. Hazelwood, MO 63042

Credit Coll 725 Canton St Norwood, MA 02062

Credit Management Lp 4200 International Pkwy Carrollton, TX 75007

Drleonards 1515 S 21st St Clinton, IA 52732

Hccredit/feb 203 E Emma Ave Ste A Springdale, AR 72764

I C System
Po Box 64378
Saint Paul, MN 55164

Illinois Department of Revenue PO Box 54338 Chicago, IL 60664-0338

Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346 Peoples Engy 200 East Randolph Chicago, IL 60601

Perfection Collection 313 E 1200 S Orem, UT 84058

Rgs Financial 1700 Jay Ell Dr Ste 200 Richardson, TX 75081

Syncb/care Credit 950 Forrer Blvd Kettering, OH 45420